

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE   |
|---------------------|----------|--------|--------|
| FEE DETERMINATION   |          |        |        |
| O.I.P.E. CLASSIFIER |          |        |        |
| FORMALITY REVIEW    | ✓        |        | 5-1-01 |

INDEX OF CLAIMS

BEST AVAILABLE COP

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

| Claim | Date    |
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If more than 150 claims or 10 actions  
staple additional sheet here

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